

COUNTY OF LOS ANGELES
SHERIFF'S DEPARTMENT
"A Tradition of Service Since 1850"


OFFICE CORRESPONDENCE

DATE: June 8, 2017
FILE:

FROM:  ALICIA E. AULT, COMMANDER
PROFESSIONAL STANDARDS
AND TRAINING DIVISION

TO: JACK W. EWELL, CAPTAIN
SPECIAL ENFORCEMENT BUREAU

SUBJECT: EXECUTIVE FORCE REVIEW COMMITTEE FINDINGS

Case Number:	SH2369362
Incident:	Hit Shooting
Incident Date:	October 29, 2014
Unit:	Special Enforcement Bureau
Suspect(s):	Herr, Travis MW/070191
Involved Employees:	Deputy Kevin Hilgendorf # 
EFRC Date:	June 8, 2017

The Executive Force Review Committee (EFRC) consisting of Commanders Alicia E. Ault, Darrell B. Bolin, and Curtis A. Jensen met and reviewed the above case.

FINDINGS:

The EFRC determined the use of force and tactics were both within Department policy.

RECOMMENDATIONS:

The EFRC recommended the performance of personnel be commended as appropriate.

AEA:TLB:tlb

COUNTY OF LOS ANGELES
SHERIFF'S DEPARTMENT
"A Tradition of Service Since 1850"


OFFICE CORRESPONDENCE

DATE: June 8, 2017
FILE:

FROM:  **ALICIA E. AULT, COMMANDER**
PROFESSIONAL STANDARDS
AND TRAINING DIVISION

TO: **MATTHEW J. BURSON, CAPTAIN**
OPERATION SAFE STREETS

SUBJECT: EXECUTIVE FORCE REVIEW COMMITTEE FINDINGS

Case Number:	SH2369362
Incident:	Hit Shooting
Incident Date:	October 29, 2014
Unit:	Operation Safe Streets
Suspect(s):	Herr, Travis MW/070191
Involved Employees:	Deputy Marco Magana # 
EFRC Date:	June 8, 2017

The Executive Force Review Committee (EFRC) consisting of Commanders Alicia E. Ault, Darrell B. Bolin, and Curtis A. Jensen met and reviewed the above case.

FINDINGS:

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COUNTY OF LOS ANGELES
SHERIFF'S DEPARTMENT
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OFFICE CORRESPONDENCE

DATE: June 8, 2017
FILE:

FROM:  ALICIA E. AULT, COMMANDER
PROFESSIONAL STANDARDS
AND TRAINING DIVISION

TO: APRIL L. TARDY, CAPTAIN
SOUTH LOS ANGELES STATION

SUBJECT: EXECUTIVE FORCE REVIEW COMMITTEE FINDINGS

Case Number:	SH2369362
Incident:	Hit Shooting
Incident Date:	October 29, 2014
Unit:	South Los Angeles Station
Suspect(s):	Herr, Travis MW/070191
Involved Employees:	Deputy Joshua Short # 
EFRC Date:	June 8, 2017

The Executive Force Review Committee (EFRC) consisting of Commanders Alicia E. Ault, Darrell B. Bolin, and Curtis A. Jensen met and reviewed the above case.

FINDINGS:

The EFRC determined the use of force and tactics were both within Department policy.

RECOMMENDATIONS:

The EFRC recommended the performance of personnel be commended as appropriate.

AEA:TLB:tlb

Los Angeles County Sheriff's Department

Officer Involved Shooting

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Report Date: 05/16/2017		Bureau/Station/Facility: South Los Angeles		Admin. Invest.? <input type="checkbox"/>	Hit? <input checked="" type="checkbox"/>
Incident Information					
URN: 014-09912-0334-055		Date: 10/29/2014		Time: 1413 hours	
City or Station: Lawndale		Nature of Incident: South Los Angeles Deputies Short, Magana and Special Enforcement Bureau Deputy Hilgendorf were involved in a Deputy involved hit shooting.			
Location: 4226 West 164th Street, Lawndale					
Location Type (check one or more): <input type="checkbox"/> Backyard <input type="checkbox"/> Beach <input type="checkbox"/> Business <input type="checkbox"/> Freeway <input type="checkbox"/> Industrial <input type="checkbox"/> Park <input type="checkbox"/> Parking Lot <input checked="" type="checkbox"/> Residence <input type="checkbox"/> Rural <input type="checkbox"/> School <input checked="" type="checkbox"/> Street Other:	Lighting (check only one): <input checked="" type="checkbox"/> Darkness <input checked="" type="checkbox"/> Daylight <input type="checkbox"/> Other <input type="checkbox"/> Street Lights Weather (circle only one): <input checked="" type="checkbox"/> Clear <input type="checkbox"/> Cloudy <input type="checkbox"/> Fog <input type="checkbox"/> Rain Distance: 75 feet	Incident Type (check one or more): <input type="checkbox"/> Accidental <input checked="" type="checkbox"/> Armed Person <input type="checkbox"/> Fleeing Suspect <input type="checkbox"/> Foot Pursuit <input type="checkbox"/> Gun Take Away <input type="checkbox"/> Moving Vehicle <input type="checkbox"/> Sniper/Ambush <input type="checkbox"/> Startle <input type="checkbox"/> Struggle Involved <input type="checkbox"/> Traffic Stop <input type="checkbox"/> Unarmed Person <input type="checkbox"/> Unintentional <input type="checkbox"/> Vehicle Pursuit <input type="checkbox"/> Warrant Service <input type="checkbox"/> Warning Shot Other:		Initiated by (check only one): <input type="checkbox"/> Arrest Warrant <input checked="" type="checkbox"/> Call <input type="checkbox"/> Observation <input type="checkbox"/> One Person Unit <input type="checkbox"/> Other <input type="checkbox"/> Search Warrant <input type="checkbox"/> Two Person Unit Prior Activity (check only one): <input type="checkbox"/> Detective <input type="checkbox"/> Inmate Transport <input type="checkbox"/> Other <input checked="" type="checkbox"/> Routine Patrol Aero Unit? <input checked="" type="checkbox"/> Canine Unit? <input checked="" type="checkbox"/>	
Total # of Shots Fired by Deputy 15-19		Total # of Shots Fired by Suspect 39			
Employee Witnesses					
Employee #	Last Name	First Name	M.I.	ShiftTime (check only one): <input type="checkbox"/> EM <input type="checkbox"/> PM <input type="checkbox"/> Day	ShiftType (check only one): <input type="checkbox"/> Regular <input type="checkbox"/> Overtime <input type="checkbox"/> Off Duty
	See pages 6-7				
Employee #	Last Name	First Name	M.I.	ShiftTime (check only one): <input type="checkbox"/> EM <input type="checkbox"/> PM <input type="checkbox"/> Day	ShiftType (check only one): <input type="checkbox"/> Regular <input type="checkbox"/> Overtime <input type="checkbox"/> Off Duty
Employee #	Last Name	First Name	M.I.	ShiftTime (check only one): <input type="checkbox"/> EM <input type="checkbox"/> PM <input type="checkbox"/> Day	ShiftType (check only one): <input type="checkbox"/> Regular <input type="checkbox"/> Overtime <input type="checkbox"/> Off Duty
Non-Employee Witnesses					
Last Name		First Name		M.I.	
See page 5					
Street Address		City	Zip Code	Work Ph	Home Ph
Last Name		First Name		M.I.	
Street Address		City	Zip Code	Work Ph	Home Ph
Last Name		First Name		M.I.	
Street Address		City	Zip Code	Work Ph	Home Ph
Supervisors					
Employee #	Last Name	First Name	M.I.	(check one or more):	
	Odenthal	Eric	M	<input checked="" type="checkbox"/> On Duty <input type="checkbox"/> Witness to shooting <input checked="" type="checkbox"/> Present during shooting <input type="checkbox"/> Involved in shooting	
Employee #	Last Name	First Name	M.I.	(check one or more):	
				<input checked="" type="checkbox"/> On Duty <input type="checkbox"/> Witness to shooting <input checked="" type="checkbox"/> Present during shooting <input type="checkbox"/> Involved in shooting	
Watch Sergeant					
Employee #	Last Name	First Name	M.I.		
	North	James	J		
Watch Commander					
Employee #	Last Name	First Name	M.I.		
	Zonver	Nicole	L		

PSTD Use Only

SH # **2369362**

Method				Type of Injury		Body Part Injured	
(AW) Arwen	(OV) Other Weapon: Vehicle	(AB) Abrasion	(AD) Abdomen				
(BC) Baton:(Control)	(OB) Other Weapon: Blunt Object	(BR) Bruise	(AK) Ankle				
(BI) Baton:(Impact)	(OO) Other Weapon: Other	(BU) Burn	(AR) Arm				
(BF) Bodily Fluids	(PK) Personal Weapon: Feet/Leg: (Kick)	(CP) Complaint of Pain	(BK) Back				
(CN) Canine	(PS) Personal Weapon: Feet/Leg: (Sweep)	(CO) Concussion	(BT) Buttocks				
(CR) Carotid Restraint	(PH) Personal Weapon (Hand/Arm)	(DH) Death	(CH) Chest				
(CH) Choke Hold	(PP) Personal Weapon (Push)	(DI) Dislocation	(EL) Elbow				
(CT) Control Holds:(Control Techniques)	(PO) Personal Weapon (Other)	(DB) Dog Bite	(FA) Face				
(TT) Control Holds:(Team Takedown)	(RS) Resistance	(FR) Fractures	(FE) Feet				
(TD) Control Holds:(Takedown)	(CN) Restraint Device (Capture Net)	(GS) Gunshot	(FI) Fingers				
(CE) Chemical	(RH) Restraint Device (Handcuffs)	(HB) Human Bite	(GE) Genitals				
(OC) Chemical Agents (OC Spray)	(HB) Restraint Device:Hobble (Legs Only)	(LC) Lacerations	(GR) Groin				
(TG) Chemical Agents (Tear Gas)	(TP) Restraint Device:Hobble (TARP)	(ND) Nerve Damage	(HD) Hand				
(EX) Explosives	(RE) Restraint Device: REACT Belt	(OD) Organ Damage	(HE) Head				
(FH) Firearm (Handgun)	(SP) Sap	(PA) Paralysis	(HI) Hip				
(FR) Firearm (Rifle)	(SH) Shield	(PW) Puncture Wound	(IN) Internal				
(FS) Firearm (Shotgun)	(SG) 37mm Stinger	(SD) Soft Tissue Damage	(KN) Knees				
(FO) Firearm (Other)	(SB) Sting Ball	(ST) Sprain/Twists	(LE) Leg				
(FB) Flashbang	(ST) Stun Bag	(UN) Unconscious	(NK) Neck				
(FL) Flashlight	(TR) Taser	(RM) Refused Med Treatment	(SH) Shoulder				
(OE) Other Weapon: Edged	(UC) Uncooperative	(NN) NONE	(WR) Wrist				
Brand				Caliber			
(AK) AK-47	(IV) Iver Johnson	(RO) Rossi	(9) 9 mm	(24) .243 caliber	(41) .410 guage		
(BN) Benelli	(JE) Jennings	(SW) Smith & Wesson	(10) 10 mm	(25) .25 caliber	(44) .44 caliber		
(BR) Beretta	(LO) Lorcin	(SR) Sturm Ruger	(12) 12 guage	(30) .308 caliber	(45) .45 caliber		
(BW) Browning	(LU) Luger	(SS) SIG Sauer	(20) 20 guage	(35) .357 caliber	(50) 50 mm		
(CH) Charter Arms	(MA) Marlin	(ST) Sterling	(21) .22-250	(36) 30-60 caliber	(SL) Slug		
(CO) Colt	(MO) Mossberg	(TA) Taurus	(22) .22 caliber	(38) .38 caliber	(WW) Other caliber		
(DA) Davis Industries	(NC) NCI aka SKS	(WE) Weatherby	(23) .223 caliber	(40) .40 caliber			
(GL) Glock	(NA) North American	(WN) Winchester					
(HA) Harrington & Richardson	(NO) Norinco	(US) US Government					
(HI) Hi Standard	(RA) Raven	(YY) Handmade (Inmate)					
(HK) H & K	(RM) Remington	(XX) Homemade (Non-Inmate)					
(IT) Ithica	(RG) RG	(ZZ) Other Brand					
	(RI) RGI						

[illegible]

Officer Involved Shooting Involved Employee Information

URN: 014-09912-0334-055

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Involved Employee									
E 1	Employee #		Last Name		Short		First Name		M.I.
							Joshua		C
	Sex: M	Race: B	Rank: DSG		Unit Assignment: South Los Angeles		Work Assignment (Unit #, Module, etc.): 31		
	ShiftTime (circle only one): <input type="checkbox"/> EM <input checked="" type="checkbox"/> PM <input type="checkbox"/> Day		ShiftType (circle only one): <input checked="" type="checkbox"/> Regular <input type="checkbox"/> Overtime <input type="checkbox"/> Off Duty		Intoxication/Drug Usage? <input type="checkbox"/>		Substance Used:		
	Hospital Admission? <input type="checkbox"/>		Hospital Name:		Coroner Case? <input type="checkbox"/>		Coroner Case #		Interviewed? <input checked="" type="checkbox"/>
	Hrs of sleep prior to shooting: 4		Duty Time (hrs):		Clothing (circle only one): <input type="checkbox"/> Plain Clothes no Vest <input type="checkbox"/> Raid Jacket w/ Vest <input type="checkbox"/> Plain Clothes w/ Vest <input type="checkbox"/> Uniform no Vest <input type="checkbox"/> Raid Jacket no Vest <input checked="" type="checkbox"/> Uniform w/ Vest		Other Factors:		
	Age: 601	Height: 225							
	Range Qualification Date:		PPC Qualification Date:		Laser Training Date:				
	Certified with Weapon Used? <input type="checkbox"/>		Patrol Certification? <input type="checkbox"/>		Certification Unit:		Prior Shootings? <input checked="" type="checkbox"/>	Number of Prior Shootings: 1	Directed Force: <input type="checkbox"/>
	Weapons Fired Brand: Colt		Caliber: .223	# Shots: 1-2	Weapons Fired Brand:		Caliber:	# Shots:	
Field Training Officer Emp #		Last Name		First Name		M.I.			
Field Training Officer Emp #		Last Name		First Name		M.I.			
E 2	Employee #		Last Name		Magana		First Name		M.I.
							Marco		A
	Sex: M	Race: H	Rank: Deputy		Unit Assignment: South Los Angeles		Work Assignment (Unit #, Module, etc.): 34		
	ShiftTime (circle only one): <input type="checkbox"/> EM <input checked="" type="checkbox"/> PM <input type="checkbox"/> Day		ShiftType (circle only one): <input checked="" type="checkbox"/> Regular <input type="checkbox"/> Overtime <input type="checkbox"/> Off Duty		Intoxication/Drug Usage? <input type="checkbox"/>		Substance Used:		
	Hospital Admission? <input type="checkbox"/>		Hospital Name:		Coroner Case? <input type="checkbox"/>		Coroner Case #		Interviewed? <input checked="" type="checkbox"/>
	Hrs of sleep prior to shooting: 5-6		Duty Time (hrs):		Clothing (circle only one): <input type="checkbox"/> Plain Clothes no Vest <input type="checkbox"/> Raid Jacket w/ Vest <input type="checkbox"/> Plain Clothes w/ Vest <input type="checkbox"/> Uniform no Vest <input type="checkbox"/> Raid Jacket no Vest <input checked="" type="checkbox"/> Uniform w/ Vest		Other Factors:		
	Age: 507	Height: 220							
	Range Qualification Date:		PPC Qualification Date:		Laser Training Date:				
	Certified with Weapon Used? <input type="checkbox"/>		Patrol Certification? <input type="checkbox"/>		Certification Unit:		Prior Shootings? <input type="checkbox"/>	Number of Prior Shootings:	Directed Force: <input type="checkbox"/>
	Weapons Fired Brand: Colt		Caliber: .223	# Shots: 10-11	Weapons Fired Brand:		Caliber:	# Shots:	
Field Training Officer Emp #		Last Name		First Name		M.I.			
Field Training Officer Emp #		Last Name		First Name		M.I.			
E 3	Employee #		Last Name		Hilgendorf		First Name		M.I.
							Kevin		K
	Sex: M	Race: W	Rank: Deputy		Unit Assignment: SEB		Work Assignment (Unit #, Module, etc.): Gray Team Scout		
	ShiftTime (circle only one): <input type="checkbox"/> EM <input type="checkbox"/> PM <input checked="" type="checkbox"/> Day		ShiftType (circle only one): <input checked="" type="checkbox"/> Regular <input type="checkbox"/> Overtime <input type="checkbox"/> Off Duty		Intoxication/Drug Usage? <input type="checkbox"/>		Substance Used:		
	Hospital Admission? <input type="checkbox"/>		Hospital Name:		Coroner Case? <input type="checkbox"/>		Coroner Case #		Interviewed? <input checked="" type="checkbox"/>
	Hrs of sleep prior to shooting: 7		Duty Time (hrs):		Clothing (circle only one): <input type="checkbox"/> Plain Clothes no Vest <input type="checkbox"/> Raid Jacket w/ Vest <input type="checkbox"/> Plain Clothes w/ Vest <input type="checkbox"/> Uniform no Vest <input type="checkbox"/> Raid Jacket no Vest <input checked="" type="checkbox"/> Uniform w/ Vest		Other Factors:		
	Age: 605	Height: 265							
	Range Qualification Date:		PPC Qualification Date:		Laser Training Date:				
	Certified with Weapon Used? <input type="checkbox"/>		Patrol Certification? <input type="checkbox"/>		Certification Unit:		Prior Shootings? <input checked="" type="checkbox"/>	Number of Prior Shootings: 1	Directed Force: <input type="checkbox"/>
	Weapons Fired Brand: Colt		Caliber: .223	# Shots: 4-6	Weapons Fired Brand:		Caliber:	# Shots:	
Field Training Officer Emp #		Last Name		First Name		M.I.			
Field Training Officer Emp #		Last Name		First Name		M.I.			

Officer Involved Shooting Suspect Information

URN: 014-09912-0334-055

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Suspect Information									
S 1	Last Name				First Name		M.I.		C
	Herr				Travis				
	AKA Last Name				First Name		M.I.		
	Sex: M	Race: W	Street Address:		City		State & Zip Code:		
	Work Phone:		Home Phone:		Social Security #:		Driver's License #:		
	Age: 41	D.O.B. 7/16/1991	Height: 506	Weight: 130	FBI #		CII #		
	Booking #		Primary Charge:		Secondary Charge:				
	3732873		664/187(a) PC						
	Coroner Case? <input type="checkbox"/>		Coroner Case #		Intoxication/Drug Usage? <input type="checkbox"/>		Substance Used:		
	Armed? <input checked="" type="checkbox"/>		Apprehended? <input checked="" type="checkbox"/>		Mental Illness? <input checked="" type="checkbox"/>		Criminal History? <input type="checkbox"/>		
	Vehicle Make		Model:		Year:		Parole:		Prior Felony Conviction:
S	Last Name				First Name		M.I.		
	AKA Last Name				First Name		M.I.		
	Sex:	Race:	Street Address:		City		State & Zip Code:		
	Work Phone:		Home Phone:		Social Security #:		Driver's License #:		
	Age:	D.O.B.:	Height:	Weight:	FBI #		CII #		
	Booking #		Primary Charge:		Secondary Charge:				
	Coroner Case? <input type="checkbox"/>		Coroner Case #		Intoxication/Drug Usage? <input type="checkbox"/>		Substance Used:		
	Armed? <input type="checkbox"/>		Apprehended? <input type="checkbox"/>		Mental Illness? <input type="checkbox"/>		Criminal History? <input type="checkbox"/>		
	Vehicle Make		Model:		Year:		Parole:		Prior Felony Conviction:
S	Last Name				First Name		M.I.		
	AKA Last Name				First Name		M.I.		
	Sex:	Race:	Street Address:		City		State & Zip Code:		
	Work Phone:		Home Phone:		Social Security #:		Driver's License #:		
	Age:	D.O.B.:	Height:	Weight:	FBI #		CII #		
	Booking #		Primary Charge:		Secondary Charge:				
	Coroner Case? <input type="checkbox"/>		Coroner Case #		Intoxication/Drug Usage? <input type="checkbox"/>		Substance Used:		
	Armed? <input type="checkbox"/>		Apprehended? <input type="checkbox"/>		Mental Illness? <input type="checkbox"/>		Criminal History? <input type="checkbox"/>		
	Vehicle Make		Model:		Year:		Parole:		Prior Felony Conviction:
S	Last Name				First Name		M.I.		
	AKA Last Name				First Name		M.I.		
	Sex:	Race:	Street Address:		City		State & Zip Code:		
	Work Phone:		Home Phone:		Social Security #:		Driver's License #:		
	Age:	D.O.B.:	Height:	Weight:	FBI #		CII #		
	Booking #		Primary Charge:		Secondary Charge:				
	Coroner Case? <input type="checkbox"/>		Coroner Case #		Intoxication/Drug Usage? <input type="checkbox"/>		Substance Used:		
	Armed? <input type="checkbox"/>		Apprehended? <input type="checkbox"/>		Mental Illness? <input type="checkbox"/>		Criminal History? <input type="checkbox"/>		
	Vehicle Make		Model:		Year:		Parole:		Prior Felony Conviction:

Los Angeles County Sheriff's Department

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Non-Employee Witnesses				
Last Name		First Name		M.I.
Street Address		Zip Code	Work Ph	Home Ph
Last Name		First Name		M.I.
Street Address		Zip Code	Work Ph	Home Ph
Last Name		First Name		M.I.
Street Address		Zip Code	Work Ph	Home Ph
Last Name		First Name		M.I.
Street Address		Zip Code	Work Ph	Home Ph
Last Name		First Name		M.I.
Street Address		Zip Code	Work Ph	Home Ph
Last Name		First Name		M.I.
Street Address		Zip Code	Work Ph	Home Ph
Last Name		First Name		M.I.
Street Address		Zip Code	Work Ph	Home Ph
Last Name		First Name		M.I.
Street Address		Zip Code	Work Ph	Home Ph
Last Name		First Name		M.I.
Street Address		Zip Code	Work Ph	Home Ph
Last Name		First Name		M.I.
Street Address		Zip Code	Work Ph	Home Ph
Last Name		First Name		M.I.
Street Address		Zip Code	Work Ph	Home Ph
Last Name		First Name		M.I.
Street Address		Zip Code	Work Ph	Home Ph
Last Name		First Name		M.I.
Street Address		Zip Code	Work Ph	Home Ph
Last Name		First Name		M.I.
Street Address		Zip Code	Work Ph	Home Ph
Last Name		First Name		M.I.
Street Address		Zip Code	Work Ph	Home Ph
Last Name		First Name		M.I.
Street Address		Zip Code	Work Ph	Home Ph
Last Name		First Name		M.I.
Street Address		Zip Code	Work Ph	Home Ph
Last Name		First Name		M.I.
Street Address		Zip Code	Work Ph	Home Ph
Last Name		First Name		M.I.
Street Address		Zip Code	Work Ph	Home Ph
Last Name		First Name		M.I.
Street Address		Zip Code	Work Ph	Home Ph

SUPPLEMENTAL EMPLOYEE WITNESSES

Los Angeles County Sheriff's Department

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Employee Witnesses				
Last Name	Valiente	First Name	Cesar	M.I.
Street Address	1310 W. Imperial Highway, Los Angeles	Zip Code	90044	Work Ph 323-820-6700 Home Ph
Last Name	Bengtson	First Name	Matthew	M.I.
Street Address	1310 W. Imperial Highway, Los Angeles	Zip Code	90044	Work Ph 323-820-6700 Home Ph
Last Name	Escalante	First Name	Marcos	M.I.
Street Address	1310 W. Imperial Highway, Los Angeles	Zip Code	90044	Work Ph 323-820-6700 Home Ph
Last Name	Torres	First Name	Josue	M.I.
Street Address	1310 W. Imperial highway, Los Angeles	Zip Code	90044	Work Ph 323-820-6700 Home Ph
Last Name		First Name		M.I.
Street Address		Zip Code		Work Ph Home Ph
Last Name		First Name		M.I.
Street Address		Zip Code		Work Ph Home Ph
Last Name	Meehan	First Name	John	M.I.
Street Address	1310 W. Imperial Highway, Los Angeles	Zip Code	90044	Work Ph 323-820-6700 Home Ph
Last Name	Kiguelman	First Name	Richard	M.I.
Street Address	1310 W. Imperial Highway, Los Angeles	Zip Code	90044	Work Ph 323-820-6700 Home Ph
Last Name	Jimenez	First Name	Ismael	M.I.
Street Address	1310 W. Imperial Highway, Los Angeles	Zip Code	90044	Work Ph 323-820-6700 Home Ph
Last Name		First Name		M.I.
Street Address		Zip Code		Work Ph Home Ph
Last Name	Odenthal	First Name	Eric	M.I.
Street Address	1310 W. Imperial Highway	Zip Code	90044	Work Ph 323-820-6700 Home Ph
Last Name	Jimenez	First Name	Fred	M.I.
Street Address	1310 W. Imperial Highway, Los Angeles	Zip Code	90044	Work Ph 323-820-6700 Home Ph
Last Name	Lim	First Name	Robert	M.I.
Street Address	1310 W. Imperial Highway, Los Angeles	Zip Code	90044	Work Ph 323-820-6700 Home Ph
Last Name	Munoz	First Name	Ricardo	M.I.
Street Address	1060 N. Eastern Avenue, Monterey Park	Zip Code	90063	Work Ph 323-881-7800 Home Ph
Last Name	Roth	First Name	Grant	M.I.
Street Address	1060 N. Eastern Avenue, Monterey Park	Zip Code	90063	Work Ph 323-881-7800 Home Ph
Last Name	Leon	First Name	Daniel	M.I.
Street Address	1060 N. Eastern Avenue, Monterey Park	Zip Code	90063	Work Ph 323-881-7800 Home Ph

SUPPLEMENTAL EMPLOYEE WITNESSES

Los Angeles County Sheriff's Department

Page 7 of 7

Employee Witnesses			
Last Name	Boucher	First Name	Russell
			M.I.
Street Address	1060 N. Eastern Avenue, Monterey Park	Zip Code	90063
		Work Ph	323-881-7800
		Home Ph	
Last Name	Smelser	First Name	Christopher
			M.I.
Street Address	1060 N. Eastern Avenue, Monterey Park	Zip Code	90063
		Work Ph	323-881-7800
		Home Ph	
Last Name	Longan	First Name	Stephen
			M.I.
Street Address	1060 N. Eastern Avenue, Monterey Park	Zip Code	90063
		Work Ph	323-881-7800
		Home Ph	
Last Name	Dearborn	First Name	Karen
			M.I.
Street Address	3235 Lakewood Boulevard, Long beach	Zip Code	90808
		Work Ph	562-421-2701
		Home Ph	
Last Name	Bartsch	First Name	Erick
			M.I.
Street Address	3235 Lakewood Boulevard, Long beach	Zip Code	90808
		Work Ph	562-421-2701
		Home Ph	
Last Name	Sinclair	First Name	Sheila
			M.I.
Street Address	3235 Lakewood Boulevard, Long beach	Zip Code	90808
		Work Ph	562-421-2701
		Home Ph	
Last Name	Palomino	First Name	Robert
			M.I.
Street Address	1060 N. Eastern Avenue, Monterey Park	Zip Code	90063
		Work Ph	323-881-7800
		Home Ph	
Last Name	Jones	First Name	Jeff
			M.I.
Street Address	3235 Lakewood Boulevard, Long Beach	Zip Code	90808
		Work Ph	562-421-2701
		Home Ph	
Last Name		First Name	
			M.I.
Street Address		Zip Code	
		Work Ph	
		Home Ph	
Last Name		First Name	
			M.I.
Street Address		Zip Code	
		Work Ph	
		Home Ph	
Last Name		First Name	
			M.I.
Street Address		Zip Code	
		Work Ph	
		Home Ph	
Last Name		First Name	
			M.I.
Street Address		Zip Code	
		Work Ph	
		Home Ph	
Last Name		First Name	
			M.I.
Street Address		Zip Code	
		Work Ph	
		Home Ph	
Last Name		First Name	
			M.I.
Street Address		Zip Code	
		Work Ph	
		Home Ph	
Last Name		First Name	
			M.I.
Street Address		Zip Code	
		Work Ph	
		Home Ph	